2113

CERTIFICATE OF MAILING
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on 25 July 2005
Jeannie Camara
(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara
(Signature of Person Mailing Paper or Fee)

PATENT APPLICATION
Attorney Docket No. SUN-P6578-PIP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF)
) Examiner: Manoskey, Joseph D.
Ralph B. Campbell)
) Group Art Unit: 2113
Serial No. 10/043,038)
)
Filing Date: 7 November 2001)
)
Title: METHOD AND APPARATUS FOR)
LOGGING FILE SYSTEM OPERATIONS)

AMENDMENT TRANSMITTAL LETTER

Mail Stop: Non Fee Amendment
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

[x] Response under 37 C.F.R. § 1.111 to official action mailed **23 June 2005.**

[ ] A petition for extension of time is also enclosed with a fee of $55.00 for a one-month extension for a small entity.

[ ] Terminal disclaimer under 37 C.F. R. § 1.321(c), including
[ ] check for $110.00 fee under 37 C.F.R. § 1.20(d), and
[ ] 2 certificates under 37 C.F.R. § 3.73(b).

[ ] Appendix including a copy of the postcard from the USPTO and page 8 of the specification .

[x] No additional claims fees are required.

[ ] An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x $50 =	
Independent Claims		MINUS = 3	0	x $200 =	
If Amendment adds multiple dependent claims, add $260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					$0.00

[ ] A check in the amount of $____ is enclosed.
[ ] Charge $___ to Deposit Account No. ____ (Docket No. ___).
[x] Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P6578).

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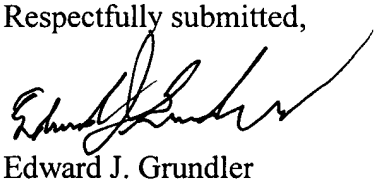
Respectfully submitted,

By 
Edward J. Grundler
Registration No. 47,615

Date: 25 June 2005

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Application Number	: 10/043,038	Confirmation Number: 4604
Applicant	: Ralph B. Campbell et al.	
Filed	: 7 November 2001	
TC/A.U.	: 2113	
Examiner	: Manoskey, Joseph D.	
Docket Number	: SUN-P6578-PIP	
Customer No.	: 22,835	

M/S: Box Non Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of **23 June 2005**, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 11 of this paper.